

HEALTH FACILITY COMMITTEE MEETING

Cannon Health Building, Room 114

9:00 a.m., July 31, 1998

Members Present: Lou Ann B. Jorgensen; Patrick Kronmiller, M.D.; Travis Jackman; J. Stephen Anderson; Kathy Siskin; Gayle Morawetz; Helen Rollins.

Members Excused: Kathleen Fitzgerald; Steven Bateman; Michael Stransky; Leora Medina.

Staff: Debra Wynkoop-Green; Wendee Pippy; David Eagar; Dave Shorten; Larry Naylor; Bonnie Winter.

The meeting was called to order at 9:00 a.m.

1. Welcome

Dr. Jorgensen welcomed all in attendance.

2. March 27, 1998 Minutes

Ms. Siskin made a motion to accept the minutes of the May 22, 1998 meeting.

Ms. Jackman seconded the motion. The **MOTION PASSED** unanimously.

3. Licensure Actions/Sanctions

Mr. Eagar updated the Committee on the Licensure Actions/Sanctions that have been processed since the May meeting. Please see the attached table on sanction actions.

Dr. Jorgensen asked if there is hesitation on the part of the providers to correct some of the situations because they are the only facility in the area? Mr. Eagar stated that some of the deficiencies were issued to licensees, to the administrators for not having trained staff, enough staff on site, etc. These do not have to do with location, but a reluctance to become familiar with the rules, process and requirements. Dr. Jorgensen asked what would happen if Beehive Homes of Wayne County, a facility in a rural area, closed down and if there is training the Bureau can conduct to assist the facility because of their isolation? Ms. Wynkoop-Green stated the Beehive Homes own over 20 facilities statewide and they sell the franchises, so this is not an organization without a support network. Dr. Jorgensen asked Mr. Eagar to encourage Beehive Homes to train as is needed to be in compliance.

4. **Assisted Living Subcommittee**

Ms. Siskin proposed that the Assisted Living rules be adopted. She stated that there were minor changes made overall and all subcommittee members were in consensus except for one.

Dr. Jorgensen asked why the whole rule was underlined. Ms. Wynkoop-Green responded stating that the Assisted Living Rules is new due to the statute having been changed. (Residential Care Facilities no longer exists and is now Assisted Living Level 1.)

Mr. Anderson stated that one of the issues involved in ICF/NCF's is the ability to egress. Type I indicates that a person must have the capability of achieving mobility with assistance of another person - does that mean the physical and mental capability to egress?

Ms. Wynkoop-Green stated that you can give verbal prompting, but the person would have to use their walker, wheelchair or a cane and be able to find the exit on their own.

Mr. Anderson asked if in Type II if there are such requirements for one person assistants and is it in the rules? Ms. Wynkoop-Green stated that it is, on page two.

Ms. Morawetz asked what would be required if a facility wanted to change from one type to another? Ms. Siskin stated that there are different construction rules that would need to be met. Therefore, unless their building met the requirements, they could not upgrade.

Ms. Siskin made a motion that the rules be adopted. Ms. Rollins seconded the motion. The **MOTION PASSED** unanimously.

5. **Ambulatory Health Care**

Mr. Shorten reported that the Ambulatory Health Care Subcommittee has met four times and has come to some conclusions. The subcommittee would like to meet one more time.

Mr. Shorten state that the Department of Occupational and Professional Licensing (DOPL) and the Department of Environmental Quality (DEQ) had representatives at the last meeting who voiced their complaints and/concerns. A tentative agreement was made that there is an avenue in physician operated clinics for people to voice grievances or take complaints to and that there is a resolution process. DOPL initiates investigations based on a trend of poor performance or gross malfeasance. Every complaint is received and reviewed. DEQ will go out and look at any type of ionizing/radiating device. They do not govern MRI's and other non-emitting machines. None-the-less, bad performance by a provider would go to DOPL. Therefore, it doesn't appear to need another level of regulation in that area.

Infusion agencies/centers were talked about in the last meeting and a suggestion was made that the subcommittee look at expanding the home health rules to include that process. Also discussed was imaging centers. As far as the subcommittee's research, there isn't a

compelling need for us to get involved. Most of the imaging centers are satellites of other regulated facilities.

A few other items are still to be discussed at the next meeting on August 19, 1998 at 4:00 p.m. in room 301 at the Cannon Health building.

6. Rule Updates

Ms. Pippy reported the following:

R432-102 - Chemical Dependency/Substance Abuse - was made effective June 26, 1998.

R432-35 - Background Screening - was filed and can become effective August 15, 1998.

R432-6 - Assisted Living Construction - was filed and can become effective September 1, 1998.

R432-100 - General Acute Hospital Standards - was filed and can become effective September 15, 1998.

R432-150 - Nursing Care Facility Rules - are proposed to be filed August 14, 1998 with an effective date of October 2, 1998.

R432-750 - Hospice Rule (in-patient Section) - are proposed to be filed August 14, 1998 with an effective date of October 2, 1998.

R432-1 - General Health Care Facility Rules (definitions) - are proposed to be filed August 14, 1998 with an effective date of October 2, 1998.

7. End of Life Directive

Ms. Rollins put forward a proposal to the committee to consider setting up a subcommittee to discuss end of life directives be added to the rules.

Ms. Rollins stated that the public has the idea that when a person signs an advanced directive they have a “magic” document that tells all facilities what they want. However, getting this packet to go with the person from facility to facility (i.e. a nursing home to a hospital) the document disappears into the “bowels” of the facility. The patient and their family are moving forward in good faith, thinking the document is also going from facility to facility. Ms. Rollins proposed that the committee put together a subcommittee with representatives from all types of providers to come up with a process that works.

Ms. Rollins stated that the reason she knows it can be done, is that Oregon has done it. They have come up with a document that contains all the information on one piece of hot pink paper. The document goes with the patient as he/she moves in and out of the health care system.

Ms. Rollins moved to appoint a subcommittee with the usual representation of the health care providers to examine the issue. Ms. Siskin stated that the committee had talked about this issue previously and that it is frustrating for the facilities and she is happy to see this come up. Ms. Jackman asked that an attorney be included on the subcommittee. Ms. Siskin seconded the motion. Discussion followed.

Ms. Wynkoop-Green explained that the Bureau does not have the resources to set up and staff this committee until at least January of 1999. Ms. Rollins stated that if the committee agreed to at least use the implied authority or overview function of the committee, that she and Ms. Siskin would be willing to donate her time to do the writing of the letters and doing the work to convene a committee. Ms. Rollins then stated that by the first of the year, maybe, it would be possible for Ms. Wynkoop-Green to assign someone of her staff to help. Dr. Jorgensen asked if Ms. Rollins would like to amend the motion that she and Ms. Siskin would take the leadership in the beginning stage and then in September follow-up. Ms. Rollins stated that she would. Ms. Siskin seconded the motion. The **MOTION PASSED** unanimously.

8. Five Year Review Construction

Mr. Naylor stated that it is time for the construction rules to be addressed. Primarily the Hospital, Nursing Home and Ambulatory Surgical Center Construction rules need to be addressed. Mr. Naylor stated that it will not be a huge effort, probably not more than a day if the right subcommittee is put together. Mr. Naylor proposed that a subcommittee be created to look at the construction rules. Dr. Jorgensen suggested that Mr. Naylor contact Mr. Stransky as he may be interested in chairing the committee. Mr. Naylor asked for the committee's approval to form the subcommittee and asked for suggestions for the subcommittee members. Ms. Jackman made a motion that Mr. Naylor may form the subcommittee. Ms. Morawetz seconded the motion. The **MOTION PASSED** unanimously.

9. Building Blocks = FY99

Ms. Wynkoop-Green stated that the Bureau is in the process of initiating the building blocks request. The Bureau is requesting the addition of two FTE's, health facility licensing specialists to continue to keep up with the growth within the industry. The Bureau has added an architect to the staff working 20 hours a week and have received an additional background criminal technician. Ms. Wynkoop-Green reviewed the process of the background screening, the intended results of the process and results so far.

10. Election for Vice-Chair for FY98

Ms. Wynkoop-Green stated who was eligible for Vice Chair and reassignment. Dr. Jorgensen asked if Ms. Wynkoop-Green would like to wait until all members are present at the next meeting. Ms. Wynkoop-Green stated that she would. Ms. Rollins will take over as Chair at the next meeting.

11. Other Items

The next meeting will be on September 25, 1998 in room 125.

The meeting adjourned at 10:35 a.m.

Helen Rollins, Chairperson

Debra Wynkoop-Green, Executive Secretary